

Health Disparities Legislative Update

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After 166 days and a looming state government shut-down a few days away, the 48th Legislature 2nd Regular Session finally adjourned on June 30th. By all accounts it was one of the most grueling and difficult sessions, due to the sluggish economy. Arizona was faced with a \$2.2 billion deficit, the largest of any state. Passing a balanced FY 2009 budget required \$360 million in agency reductions, \$340 million in fund sweeps, \$590 million in bonding for school construction, \$330 from education payment roll-overs and the remaining in other fund transfers and revenue enhancements such as fee increases.

It is too soon to grasp the full impact of such reductions to the state budget, but it is important to note that a great deal of consideration was given to the importance of state services, especially those that serve Arizona's disparate populations.

The following are brief summaries of several noteworthy bills that passed during the 2008 session that will make a difference in the ongoing efforts to address health disparities:

SB 1078 Infectious Diseases; Expedited Therapy (Laws 2008, Chapter 12)

Until the passage of SB 1078, Arizona was one of thirteen states that had laws prohibiting the use of expedited therapy to combat the spread of communicable diseases.

Expedited therapy gives medical providers the option to prescribe medications to contacts of communicable diseases for treatment without a physical exam. This practice is especially helpful in getting early intervention to persons who do not have access to health care services, but who may have been exposed to a communicable disease.

As a result of the passage of this bill, certain communicable diseases such as pertussis, scabies and plague may be treated through expedited therapy to contacts of infected persons to prevent serious infection and further transmission of the disease. SB 1078 may be one of the most important public health measures to pass the Legislature in many years.

HB 2521 Birth Defects; Folic Acid Supplements (Laws 2008, Chapter 52)

This is an important bill that will help the Arizona Department of Health Services (ADHS) and its community partners do a more effective job in preventing birth defects and assisting families of children with birth defects.

Until its passage, statute only permitted ADHS to administer the Folic Acid Distribution and Education Program (FADEP) through the local county health departments. HB 2521 will now allow ADHS to also contract with community-based organizations to provide these services. This expansion will give the program a greater ability to reach low-income populations that receive services in community health centers and non-profit

agencies rather than their local health departments. This will help eliminate the difficulty that FADEP has had in the past with reaching some of the most high-risk populations in counties that do not have a strong county health department presence in the community.

HB 2521 will also allow ADHS to share information from the Chronic Disease Birth Defect Registry Program with the Arizona Early Intervention Program at the Arizona Department of Economic Security so they may notify families of children with birth defects of the available services and the organizations that provide them.

SB 1113 HIV-Related Testing (Laws 2008, Chapter 13)

Arizona's laws regarding HIV testing and confidentiality were passed in the early '90s and had not been updated until this past legislative session. Despite major advances in rapid testing, confidentiality, treatment and prevention, Arizona laws still required an onerous, multifaceted consent process for testing. While other infectious diseases that are tested for do not require written prescribed consent, HIV always has and as a result may have caused reluctance from health professionals to encourage testing as part of routine health care services. SB 1113 changed the law to allow for oral consent for HIV testing and scaled back the onerous provisions of the requirements of consent from the '90s. As a result, more HIV testing will occur, resulting in early intervention, treatment and prevention.

SB 1329 AHCCCS; self-directed care services (Laws 2008, Chapter 58)

The shortage of available health care workers and caregivers is becoming a significant issue for persons with disabilities. SB 1329 will help provide more options for persons with functional disabilities through the establishment of a self-directed care service program. The program will now allow disabled persons to select and employ a neighbor or family member to provide limited services to them and receive reimbursement. This will allow persons to maintain independence in their home as opposed to institutional care by increasing the available home health care options.

SB 1418 tobacco cessation medication; coverage; AHCCCS (Laws 2008, Chapter 131)

Studies have shown that the percent of tobacco users enrolled in Medicaid is much greater than that of the general population. SB 1418 permits AHCCCS to expand services to include tobacco cessation as a Medicaid benefit. The cost of the expanded benefit will be covered through an intergovernmental agreement with the Arizona Department of Health Services Tobacco Education and Prevention Program. The expanded services will draw down federal matching monies and free up resources for more services and lower health care costs.